

TELECOPIER COVER SHEET**April 26, 2006****RECEIVED
CENTRAL FAX CENTER
APR 26 2006**

To: Assistant Commissioner for Patents	From: Estella Pineiro Patent Administrator 818-493-2251
Attention: TECHNOLOGY CENTER 3700 Examiner: Bryan M. Jackson Art Unit: 3762	ST. JUDE MEDICAL CRMD 15900 Valley View Court Sylmar, California 91392-9221
Telecopier: 571-273-8300	Telecopier: 818/362-4795
RE: Filing of Amendment App. No.: 10/728,659 Filed: 12/05/2003 Docket No.: A03P1078US03 Confirmation No. 1269	Number of pages being sent: <u>13</u> (including cover page)

PLEASE DELIVER TO EXAMINER BRYAN JACKSON, Art Unit 3762.
Thank you.

PATENTIN THE UNITED STATES PATENT AND TRADEMARK OFFICERECEIVED
CENTRAL FAX CENTER
APR 26 2006

Applicant: Paul A. Levine

Confirmation No.: 1269

Serial No.: 10/728,659

Examiner: Bryan M. Jackson

Filed: 12/05/2003

Art Unit: 3762

Docket No.: A03P1078US03

For: METHOD AND APPARATUS FOR IMPROVING SPECIFICITY OF
ATRIAL TACHYCARDIA DETECTION TECHNIQUES IN DUAL-
UNIPOLAR OR DUAL-BIPOLAR IMPLANTABLE CARDIAC
STIMULATION SYSTEMS

TRANSMITTAL LETTER, FEE AND CERTIFICATE OF MAILING

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

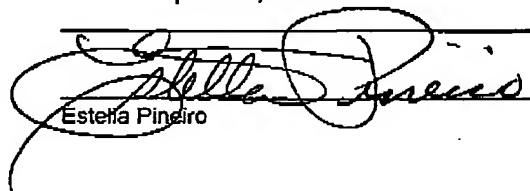
Dear Sir:

Submitted herewith for filing are the following documents:

- X Amendment
X Transmittal Letter, Fee and Cert. of Mailing

I hereby certify that this correspondence is being facsimile transmitted to
the United States Patent and Trademark Office on:

April 26, 2006



Estela Pinedo Date 4/26/06

PATENT

CALCULATION OF FEES						
ITEM		NO. OF CLAIMS REMAINING AFTER AMENDMENT	NO. OF CLAIMS PREVIOUSLY PAID FOR	ADD'L CLAIMS FILED	LARGE ENTITY FEE	\$ FEE
A	TOTAL CLAIMS FEE	18	20	0	X \$ 50	\$ 0
B	INDEPENDENT CLAIMS FEE**	5	5	0	X \$200	0
C	MULTIPLE- DEPENDENT				X \$ 360	0
D	EXTENSION OF TIME FEE — 1-mon: \$120; 2-mon: \$450; 3-mon: \$1,020; 4-mon: \$1,590; 5-mon: \$2,160					0
E	ADDITIONAL FEES (i.e., Surcharge – Late Fee- Declaration; Petitions; Information Disclosure Statement; Terminal Disclaimer, etc.) Specify:					0
F	TOTAL ADDITIONAL FEE** (ADD TOTALS FOR LINES A,B,C,D. and E)					\$0**

<u>X</u> Charge Deposit Account No. 16-0068 the amount of	\$0**	A copy of this letter is enclosed.
---	--------------	---------------------------------------

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 16-0068

X Any additional filing fees required under 37 CFR 1.16.

X Any patent application processing fees under 37 CFR 1.17.

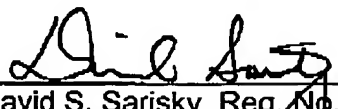
X The Commissioner is hereby authorized to charge payment of the following fees during the pendency of this application or credit any overpayment to Deposit Account No. 16-0068

X Any patent application processing fees under 37 CFR 1.17.

X Any filing fees under 37 CFR 1.16 for presentation of extra claims.

Respectfully submitted,

Date 26 APR 2006


David S. Sarisky, Reg. No. 41,288
Patent Attorney for Applicant
818-493-3369

CUSTOMER NUMBER: 36802

RECEIVED
CENTRAL FAX CENTER**PATENT****APR 26 2006****IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

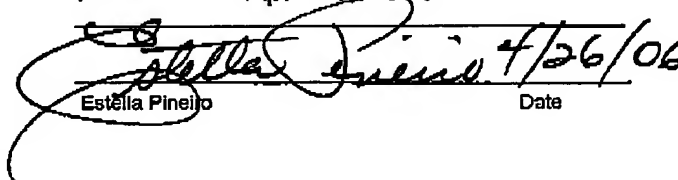
Applicant:	Paul A. Levine	Confirmation No.:	1269
Serial No.:	10/728,659	Examiner:	Bryan M. Jackson
Filed:	12/05/2003	Art Unit:	3762
Docket No.:	A03P1078US03		
For:	METHOD AND APPARATUS FOR IMPROVING SPECIFICITY OF ATRIAL TACHYCARDIA DETECTION TECHNIQUES IN DUAL- UNIPOLAR OR DUAL-BIPOLAR IMPLANTABLE CARDIAC STIMULATION SYSTEMS		

AMENDMENT

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

I hereby certify that this correspondence is being facsimile
transmitted to the United States Patent and Trademark Office

on: April 26, 2006



Estella Pineiro Date 4/26/06

Dear Sir:

In response to the Office Action mailed January 26, 2006, please amend the
above-identified application as follows: